

<b>CLAIMS ONLY</b>						Application Number	Filing Date	
						101810576	Applicant(s)	
* May be used for additional claims or amendments								
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*	
	Indep	Depend	Indep	Depend	Indep	Depend		
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Total Indep	1							
Total Depend	19	←	←	←				
Total Claims	20							